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PTO/SB/21 (08-00)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/008,763
		Filing Date	11/30/2001
		First Named Inventor	RAFFI CODILIAN
		Group Art Unit	2651
		Examiner Name	Unknown
Total Number of Pages in This Submission		Attorney Docket Number	K35A0999

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	-Exhibit A: copy of the Filing Receipt dated 3/25/02
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	- Exhibit B: copy of the Application Data Form and Transmittal Form filed 3/8/02
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
Request for Correction of Filing Receipt Postcard		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	WON TAE C. KIM, REG. NO. 40,457
Signature	
Date	7/23/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

7/23/02

Typed or printed name	Adriana Varela	Date	7/23/02
Signature			

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PATENT
Docket No. K35A0999

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: RAFFI CODILIAN

Group No. 2651

Application No.: 10/008,763

Examiner: Unknown

Filed: 11/30/2001

For: SHOCK EVENT ERROR LOGGING IN A DISK DRIVE

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Office of Initial Patent Examination's Customer Service Center
Assistant Secretary and Commissioner of Patent and Trademark
Arlington, VA 22202

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Sir/Madam:

REQUEST FOR CORRECTION OF FILING RECEIPT

Applicants Attorney hereby requests that a correction be made in the Applicant(s) in the above-referenced patent application due to an omission of applicant's residence, which was discovered in the Filing Receipt, dated 03/25/2002. The Applicant(s) city should read as follows:

Raffi Codilian, Irvine, CA

Enclosed are copies of the following:

Exhibit A: copy of the Filing Receipt dated 3/25/02

Exhibit B: copy of the Application Data Form and Transmittal Form filed 3/8/02

Respectfully submitted,

By: *W. Kim*
WON TAE C. KIM, ESQ.

Attorney for Applicants
Registration No. 40,457

7/23/02
Date

WESTERN DIGITAL
Intellectual Property Law – C205
20511 Lake Forest Drive
Lake Forest, CA 92630
Telephone: (949) 672-7813

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Date: 7/23/02

Adriana Varela
Adriana Varela, Patent Paralegal



EXHIBIT A

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/008,763 ✓	11/30/2001 ✓	2651	974	K35A0999 ✓	13	33	2

26332
 WESTERN DIGITAL CORP.
 20511 LAKE FOREST DRIVE
 C205 - INTELLECTUAL PROPERTY DEPARTMENT
 LAKE FOREST, CA 92630

CONFIRMATION NO. 9233

UPDATED FILING RECEIPT



OC000000007701805

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Date Mailed: 03/25/2002

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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Raffi Codilian, Residence Not Provided; ✓

Assignment For Published Patent Application

WESTERN DIGITAL TECHNOLOGIES, INC., LAKE FOREST, CA;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 01/09/2002

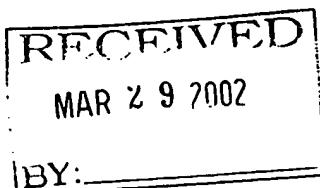
Projected Publication Date: Request for Non-Publication Acknowledged ✓

Non-Publication Request: Yes /

Early Publication Request: No /

Title

Shock event error logging in a disk drive ✓



Preliminary Class

369



EXHIBIT B (1 of 3)

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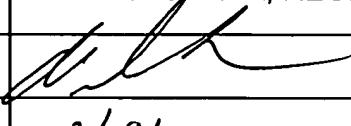
Attorney Docket Number

K35A0999

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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	-Notice to File Corrected Application Papers
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	-Application Data Sheet
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	-Nonpublication Request
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		-Post Card
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

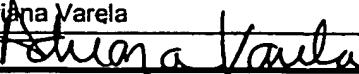
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	MILAD G. SHARA, REG. NO. 39,367
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